



Guest Orientation Manual

Welcome to Confluence Health! This Guest Orientation Manual introduces the expected knowledge and behaviors of facility guests, including students, vendors, contractors, and others, while working at CH facilities. This manual includes information on confidentiality, safety, infection control practices and emergency practices.

Please read the manual before your first shift at a Confluence Health facility. Refer any questions to your supervisor or clinical instructor/preceptor. You may also contact the Education Services Department for additional assistance.

Mission and Core Values

Mission:

We are dedicated to improving our patients' health by providing safe, high-quality care in a compassionate and cost-effective manner.

Core Values

1. Our patients are the reason for our being, and their needs will drive all of our actions.
2. We will treat everyone (including patients, their families, referring offices, and colleagues) with dignity, respect and compassion.
3. We will work as a team, utilizing collaboration, active participation and open communication among all physicians and staff.
4. We will continue to innovate ways to improve the delivery of excellent, high value care.
5. We will measure successes and failures, and use the results to drive further improvement.
6. We will be a good neighbor in the communities we serve with donations of time, talent and capital.
7. We will be ethical and accountable in all of our decisions and actions

Confluence Health Culture

Code of Conduct

It is the policy of Confluence Health (CH) that all physicians, staff and agents of CH adhere to a code of conduct with defined principles of behavior and work collaboratively to promote these principles of behavior within the organization and in the community.

All members of the health care team (e.g. physicians, staff, vendors, contract personnel) and all direct and indirect recipients of health care (e.g. patients, their families, visitors) shall be treated in a respectful, dignified manner at all times. Language, nonverbal behavior and attitudes shall reflect this respect and dignity of the individual and affirm his/her value to the process of effective, efficient health care.

Prohibited Conduct

The activities prohibited by Confluence Health include, but are not limited to, the following:

1. Reporting to your shift under the influence of alcohol or drugs, or otherwise impaired
2. Use or consumption of alcohol or other intoxicating substances on CH premises
3. Selling or distributing illegal substances while on CH premises
4. Stealing from patients, CH, or employees
5. Any form of dishonesty
6. Disorderly conduct, including fighting, acting in an obscene manner or using obscene, abusive or threatening language or foul play
7. Smoking in an area where smoking is prohibited. All Confluence Health facilities are tobacco-free and prohibit smoking or use of any tobacco products in any buildings on its campuses or in facilities controlled by CH.
8. Defacing or damaging CH property
9. Possession or use of firearms, fireworks, or any other weapon on CH property
10. Excessive use of telephones or other equipment for personal matters
11. Disobeying safety regulations
12. Noncompliance with policies
13. Failure to observe security regulations
14. Failure to maintain confidentiality, including matters relating to patients
15. Any action that destroys good relations between CH and its employees or between CH and any of its suppliers or patients
16. Harassment of any kind (i.e. sexual, racial, age, etc.)

Fitness for Duty

All workforce members are expected to demonstrate “fitness for duty” while on the job. They must be able to work safely, with full control of their physical abilities, mental

faculties, and judgment. A variety of factors may impair an employee's abilities including substance abuse, medical conditions (i.e. high or low blood sugar), medical illness, sleep deprivation, senility, or mental illness.

If you have reason to believe that a workforce member is impaired and not fit for duty, you are expected to report it immediately to your supervisor or director. If you are personally facing an impairment issue, you have an obligation to inform your supervisor or director of the issue immediately.

Dress Code

The professional image, reputation and perception of Confluence Health are influenced, in part, by the professional image, behavior, and personal appearance of its staff (employees, physicians, students, vendor representatives, contract/agency staff, and volunteers). Neat, well attired, and clean appearances create an atmosphere of confidence, respect, and professionalism, which is expected by our patients, families, physicians, and colleagues. All clothing should be professional and appropriate to the nature and scope of one's position. Clothing should be neat, clean, well fitted, and in good repair. No jeans or denim are permitted. Sandals and/or open toed shoes are not allowed in patient care areas. An identification badge will be worn at all times when on campus. Appearance should adhere to Confluence Health's, *Policy 400 Professional Appearance and Dress Code*.

Student Dress Code

Students are expected to follow their specific school uniform requirements and identification while at Confluence Health.

Compliance

Confluence Health relies on each individual's sense of fairness, honesty and integrity to meet the challenges and complexity of providing high value, high quality care. Our Compliance Program and Code of Conduct provide guidance for carrying out daily activities using appropriate ethical and legal standards. These standards apply to relationships with patients, physicians, staff, and outside organizations we work with.

Confluence Health is made up of several service areas, all of which are governed by complex and ever-changing rules and regulations. With the vast number of federal, state and local agencies that set laws, standards, or rules that affect our organization in today's complex work of healthcare, a strong compliance program is critical in ensuring that the facility, and its employees, meet all legal and ethical requirements.

If you become aware of, or suspect any violation of the compliance rules, you must take action by doing one of the following:

1. Tell your immediate supervisor: by phone, in writing, or in person.
2. If you are unable to discuss the situation with your supervisor, contact your Compliance Officer or any executive team member to report the event per facility policy.

When reporting a compliance violation, you must maintain confidentiality about the suspected or actual violation. Do not seek opinions or assistance from other employees, family members, or friends. Instead, let the Compliance Officer perform a thorough investigation and evaluate the issue.

HIPAA Standards or Rules

When a patient enters the CH system, we assume an obligation to keep in confidence all information about their personal affairs. As a guest, you are responsible for adhering to all CH policies and standards related to patient confidentiality.

Patients expect and need their private medical information to transfer easily as they move through the healthcare system. Unfortunately, this ease of access also creates concern that private information could be lost or shared inappropriately. To address these concerns, the Health Insurance Portability and Accountability Act (HIPAA) established privacy and security rules. These rules identify which patient information is considered protected (Protected Health Information or PHI) and how healthcare organizations are to manage this type of patient information. Confluence Health is fully committed to complying with HIPAA requirements in all aspects of patient care and operations.

You are required to adhere to the following HIPAA-based rules:

1. Don't view patient records that you have no need to see. Access only the minimum health information necessary to do your job.
2. Don't share information about patients with any employee who doesn't need it to do their job.
3. Avoid discussing patient issues outside patient care areas. At all times, take reasonable care to make sure that your conversation is not overheard.
4. Don't share patient information with your family, friends, or others outside the hospitals or clinics.
5. Do not leave health information unattended. File and store hard copy documents appropriately. Lock your computer screen or log off before you walk away from your computer.
6. Provide HIPAA information to patients so they understand your concerns about confidentiality and your practice standards.

Allowable PHI Disclosures

Healthcare workforce members **may** disclose Protected Health Information (PHI) in the following situations:

1. To provide, coordinate, or manage a patient's health care at Confluence Health or to enable another authorized provider to do so.
2. To obtain or provide reimbursement for services or to permit another healthcare agency to do so.
3. When requested by a public health authority (e.g., Chelan Douglas Health District) that is authorized to collect the information in order to prevent or control disease, injury, or disability.
4. When requested by a public health authority or other government authority authorized by law to receive reports of child abuse or neglect.
5. When requested by a law enforcement official in order to identify or locate a suspect, fugitive, witness, or missing person.
6. See *Policy OF-6 Disclosure Use and Disclosure of Patient Medical Information (CWH)* and/or *Policy 3330.4 Minimum Necessary Requirements for the Use and Disclosure of Protected Health Information (WVMC)* for additional information on allowable disclosures of patient information including how to document the disclosure.

Anyone who discusses private and protected information with patients, volunteers, contracted or regular employees, or persons outside of the organization, other than discussion that is necessary with the sponsor/provider/preceptor/instructor, is breaching Confluence Health ethics and subject to termination of his/her relationship with the organization.

Speak Up and Event Reporting

Confluence Health employees do their best to provide the safest patient care possible. No one comes to work hoping that something will go wrong. However, despite best efforts, process and systems can break down, putting the safety of patients, employees and visitors at risk.

Process or system breakdowns cannot be addressed if they are not reported. In some cases, a quick response is required to prevent further harm or damage.

At Confluence Health, the term "event" is used to define:

1. Any situation that is thought to have actual or potential adverse effect on the:
 - Quality of Patient Care
 - Well-being of patients, employees, or visiting public
 - Security of information systems

2. Injuries resulting from accidents or errors.
3. Near Misses
4. Mishaps due to equipment failures/defects or adverse conditions in the facility.

Confluence Health provides processes for any employee, volunteer, or contract staff, to raise a concern or report an event or suggestion that ensures supportive, appropriate, and timely response.

“NOW CALL”

High Urgency situations that raise serious urgent safety concerns for patients, staff, or visitors:

- A sentinel event or major unexpected poor clinical outcomes
- Near misses or situations that could or do pose immediate danger or serious harm
- Major non-clinical support system failures

Activation:

Report immediately by calling the operator and stating “I have a NOW call”. The person calling the now call is encouraged to notify their immediate supervisor as a courtesy, but supervisory approval is not needed.

Now Calls will be responded to by senior leadership within 30 minutes of event notification. Unnecessary interruption to patient care should be avoided.

Now Calls will include a team debrief as soon as possible and should be documented within Quantros.

Reporting Events in Quantros

The purpose of reporting an event is to identify trends that may indicate system or process problems. Once a problem is identified, it can be acted upon to improve patient care.

The Quantros electronic system is the primary method of tracking events or compliance violations. You will find the link to Quantros on CH Pulse, which is the internal Intranet.

The person who recognizes an event is responsible for reporting it in Quantros. The reporter must document:

- What happened
- Who was involved
- When, Where, and Why (if known) the event occurred

If the event involves a patient, also document:

- Patient Identification information
- Any care provided to the patient by employees
- A description of the patient's status following the event
- A description of the physician's involvement following the event

Patient Rights and Responsibilities

Our patients entrust us with their care and by doing so they can expect that CH and its provider and staff will protect and promote each patient's rights.

We have the responsibility to ensure the Patient Rights information is provided to the patient in written form or explained in a language and manner the patient understands. It must be clear, thorough, and understandable.

Patient rights include but are not limited to:

- Being treated with dignity and respect provided in a safe environment that is free of mental, verbal, or sexual abuse.
- Treating the patient with dignity and respect includes maintaining professional boundaries.

Professional Boundaries

Professional boundaries are effective and appropriate interactions between the professional and the patient. Boundaries exist to protect both the professional and the patient and define the limits of appropriate behavior by a professional toward his or her patient.

Professional Boundary Violations:

- When an employee behaves in a certain way in order to satisfy his or her own personal agenda
- Any behavior or interaction which damages or potentially damages the patient
- It is the victimization of a patient by a professional
- It is a betrayal of the trust placed in the professional

Crossing the line:

- Giving the patient your personal phone number for other than professional reasons
- Asking or agreeing to be Face Book or other social media friend
- Any behavior, gestures, or expression that may reasonably be interpreted as seductive or sexual
- Dating a patient
- Engaging in sexual relationship with a patient

If you have concerns about yourself or a co-worker crossing the line be proactive.

- Contact your Manager or Supervisor immediately
- “Speak up” and say I have a concern. If you see something or have a feeling there may be an issue, say something!
- If you question whether the behavior is ok, don’t do it.
- Communicate and behave in accordance with CH standards of conduct and behavior.
- Remain professional at all times.

Patient Specific Care Competencies

As a guest at CH facilities, it’s likely that you will encounter patients from all over the world. These patients may have cultures, customs, languages, or religious practices that can affect their care. In addition, patients may have age-specific care needs, psychosocial needs, and developmental concerns that must be addressed. You must be prepared to meet these unique needs with sensitivity and compassion. Based on your assignments, you are responsible for:

- Differentiating the needs of patients in the age groups you serve.
- Using interview and/or communication techniques that are age- and culture-specific.
- Recognizing cultural needs and acting to support culture-specific care.
- Adjusting your role appropriate to the patient’s age, development, and cultural needs.
- Recognizing psychological development and modifying your care appropriately.
- Recognizing the signs/symptoms of abuse or neglect and referring appropriately.
- Identifying physical and emotional dependency needs and evaluating the patient’s support systems.
- Recognizing illness-related lifestyle changes and adjusting discharge plans accordingly.

In general, as a facility guest you must know and understand the specific groups served in your area and how you will provide for any special needs.

Infection Control

Health Screening

You should be free of communicable diseases that may be transmitted to others in our facilities. If you are sick with a fever or have an infectious illness, you are responsible for notifying the appropriate authority and staying home.

All immunizations/required testing must be completed and up-to-date prior to attending a shift at a CH facility.

Hand Hygiene

In a hospital or clinic setting where illness and injuries are common, it's easy to spread germs from one person to another. The most effective way to reduce the spread of infection is by practicing good hand hygiene.

Washing your hands is a simple process. However, during the course of a busy work shift, handwashing can either be overlooked or poorly performed. It is our ethical responsibility to our patients and others we come in contact with to minimize the spread of infection through good hand hygiene practices.

Basic Hand Hygiene Products

Confluence Health provides two types of hand hygiene products:

- Soap products to be used when washing your hands under running water
- Alcohol-based hand sanitizer that doesn't require water

Choosing the Correct Hand Hygiene Method

It's important to choose the correct hand hygiene method based on the tasks you are performing.

Soap and Running Water

You must wash your hands with soap and running water:

- When hands are visibly soiled with blood and/or bodily fluids
- After using the restroom
- Before and after eating
- Before and after food preparation and delivery
- When caring for patients with *C. difficile* or diarrheal illness
- You are allergic to or intolerant of alcohol-based hand rub products

Steps for Washing with Soap and Water

1. Wet hands with warm water.
2. Apply soap to hands and rub vigorously for at least 15 seconds, covering all surfaces of the hands and fingernails. 20 seconds minimum for food service workers.
3. Rinse hands with warm water and dry with a disposable towel.
4. Use towel to turn off the faucet.
5. Avoid using hot water to reduce risk of dermatitis.

Hand Sanitizers

You may use alcohol-based hand sanitizers:

- When hands are not visibly soiled
- Before and after patient contact
- Before donning gloves

- After removing gloves
- After contact with potentially contaminated equipment or environmental surfaces such as keyboards, mice, door handles, stairway rails and floor

Washing with Alcohol-Based Hand Sanitizer

Alcohol-based hand sanitizers are located throughout the hospitals, clinics, and offices.

When washing with alcohol-based hand sanitizers, follow these steps:

1. Apply sanitizer to the palm of one of your hands.
2. Rub hands together to cover all skin surfaces.
3. Continue rubbing your hands until dry.
4. Do not wave your hands to dry them.

Artificial and Natural Fingernails

Artificial and long natural nails harbor microorganisms to a greater extent than short natural nails, even after hand hygiene.

- If your role involves patient care, preparation, or processing of items for patient care:
- Artificial nails, artificial nail products or enhancements (e.g. tips, jewelry, overlays, wraps, gels, shellac) may not be worn.
- Nails are to be kept clean, smooth, well-manicured and of reasonable length (cannot extend past the tip of the finger by more than ¼ inch).
- Nail polish if worn must be in good repair without cracks or chips.

Isolation Precautions and Personal Protective Equipment (PPE)

Anyone with potential risk of contact with blood, bodily fluids or other potentially infectious materials must use Standard precautions to reduce the risk of personal exposure and to control the spread of disease.

Standard Precautions

Treat ALL blood and body fluids as if they are contaminated. All body substances, including but not limited to blood, saliva, feces, urine, and the mucous membranes of all persons, are considered potentially infectious regardless of the source person's diagnosis.

- Practice good hand hygiene and follow the organization's Hand Hygiene policy.
- Use Personal Protective Equipment as required
- Follow organizational procedures for routine cleaning and disinfection of environmental surfaces and equipment.
- Handle and dispose of needles and other sharps safely.
- Handle and dispose of all contaminated linen, dressings, and other contaminated waste safely.

Other types of CDC Precautions

When a patient has a specific known or suspected infectious disease, precautions are put in place to prevent the spread of disease, these include:

- Contact
- Contact Enteric
- Droplet
- Airborne Respirator
- Airborne Contact

When a patient is placed in precautions, one or more precaution signs are placed on the door of the patient's room.

- All staff providing patient care must adhere to all required precautions.
- Instruct visitors of the reasons for the isolation precautions and hand hygiene requirements.
- Visitors will be required to follow precautions.
- Family members will be discouraged from staying overnight in patient rooms.
- Precaution signs are only removed by Environmental Services after the rooms are cleaned.

Personal Protective Equipment (PPE)

Personal Protective Equipment (PPE) is specialized clothing and/or equipment made to protect you from exposure to pathogens. PPE may include but is not limited to gloves, gowns, masks, face shields, goggles, aprons, and foot covers.

Basic PPE Reminders:

- Take off all PPE when you leave the work area
- Don't wear any PPE (clean or contaminated) to non-patient care areas such as the cafeteria
- Make sure gloves, gowns, masks or face shields fit you properly

Accidental or Occupational Exposure to Blood or Body Fluids

It is the policy of Central Washington Hospital to provide a safe working environment. Employees, volunteers or temporary staff who are occupationally exposed to blood or body fluids will be evaluated by the Employee Health Nurse, House Supervisor or Emergency Department Physician.

Guests must take precautions to prevent possible injuries caused by needles and other sharp instruments or devices. Dispose of sharps and needles in designated sharps containers.

If you are exposed to blood/bodily fluids or have a sharps injury:

1. Perform First Aid
 - a. Express blood from the wound
 - b. Immediately wash wound or skin exposed to blood with soap and water for

- at least two minutes.
- c. For mucous membrane contamination: Flush contaminated areas with normal saline or water for at least five minutes.
2. Report the exposure incident immediately to your immediate supervisor/instructor and to Employee Health Services (EHS). If after hours for EHS report to the Nursing House Supervisor.

Medical Waste

Medical waste contains blood and body fluids that may potentially be infectious. Do not handle any item that you think may be contaminated. Receptacles with **RED** trash liners are for medical waste. **NEVER REACH INSIDE ANY RECEPTACLE.**

Safety/Emergencies

Ergonomics and Safe Patient Handling

Whether you will be required to push or pull heavy loads, transfer patients, or sit at a computer, you are at risk for injury. Many workplace injuries can be prevented by practicing proper body mechanics, following ergonomic guidelines, and using lift equipment when appropriate.

Ergonomic Basics

- Avoid fixed or awkward positions
- If your job involves highly repetitive tasks, take breaks from these activities.
- Avoid reaching, twisting, and bending for the tools you need to do your work. See if the tools you need can be moved to avoid these types of body movements. Keep your body movements smooth; avoid jerky or sudden body movements.
- Pay attention to aches and pains. If you do something and it hurts, report it to your manager/supervisor.
- Get help from others and use equipment whenever necessary.

Lifting or Moving Objects

To reduce your risk of injury when lifting or moving objects, follow these basic body mechanics guidelines:

- Lift with your legs, not with your back. Bend your knees and lift with your legs, rather than bending forward at the waist. Keep your spine in an erect position.
- When lifting or carrying objects, keep your stomach muscles firm and the item close to your body.
- Point your feet in the direction your arms are going and pivot your entire body. Don't twist at the waist.
- Push, rather than pull, heavy loads.
- Get help from others and use equipment whenever necessary.

Safe Patient Handling: Lifting or Moving Patients

Planning ahead is vital to your safety as well as to our patients' safety. When lifting or moving a patient:

- Assess the patient's ability to help.
- Request assistance from co-workers if required.
- Adjust the bed height according to the situation.
- Instruct the patient on how he or she can help during the lift.
- Coordinate the lift. Explain the process out loud ("1, 2, 3, lift") so the patient and staff know what to expect.
- Lift in stages. The entire move does not have to be done at once
- Don't hold your breath when you lift.
- ALWAYS use patient lift equipment when appropriate (e.g. draw sheets, slide boards, trapeze bars, and mechanical lifts).

Safe Patient Handling: Using Patient Lift Equipment

It is the policy of CH that patients are to be moved with the assistance of appropriate equipment when certain limits for manual handling are exceeded. It is the best way to protect yourself and the patient when lifting. ALWAYS take the time to obtain and use the appropriate lift equipment. It is always preferable to manual or "team" lifting. Confluence Health has a variety of patient lift equipment available:

- Floor lifts
- Ceiling lifts
- Bariatric beds

If you are unsure how to obtain or use the equipment, contact your supervisor, director, or preceptor for assistance. See *Policy PFF-67 Safe Patient Handling* and/or *Policy 6650 Employee Safe Patient Handling and Movement* for additional information.

Safe Patient Handling: Transferring Patients

When transferring patients, follow these steps:

- Secure a wheelchair before transfer. Lock the wheels and have a coworker steady the chair
- Place a transfer/gait belt around the patient's waist
- Instruct the patient on the transfer process and how he or she can help you
- Explain the process out loud (i.e. "1, 2, 3, up") so the patient and your co-workers know what to expect
- Face the patient and bend your knees as you grasp the transfer/gait belt
- Pivot as you transfer the patient and your body toward the desired destination

Electrical Safety

Electricity is usually not seen or heard, therefore, its dangers are sometimes overlooked. Mishandled electrical currents can create a variety of emergencies ranging from physical injury to fires.

Common Electrical Hazards

Recognize potential electrical hazards before they have a chance to cause an injury. Examples of electrical hazards to watch for include:

- Electrical equipment that provides even slight shocks when touched
- Electrical equipment that doesn't run properly or shows an error message
- Exposed wires on electrical cords
- Loose, cracked or discolored wall outlets
- AC plugs with bent or missing prongs
- Use of a 'cheater' so that a three-prong electrical plug can be plugged into a two-prong electrical outlet

Safe Work Practices for Electricity

Apply these safe work practices as you work with or around electricity:

- Approach any potential electrical hazard with extreme caution.
- Always follow the manufacturer's recommendations when operating electrical equipment.
- Ask for training to learn how to operate equipment safely.
- Don't use electrical equipment that has been dropped. Have it inspected first.
- Don't unplug electrical equipment by pulling or jerking on the power cord; hold onto the plug.
- Don't carry, swing, or pull electrical equipment by its power cord.
- Don't roll heavy equipment or beds over electrical power cords.
- Check electrical power cords and wall receptacles for discoloration, breaks, cracks, or exposed wiring.

Water and Electricity: A Lethal Combination

The combination of water and electricity is especially dangerous. Water increases the flow of electricity and the severity of electrical shock. When electrical equipment is used near liquids or moisture, ensure the following:

- Promptly wipe up water or other fluids that get spilled on or around equipment.
- Don't touch electrical equipment when your hands are wet.
- Avoid getting electrical equipment wet in shower or bathtub areas.

Reporting Electrical Hazards

Report any potential or actual electrical hazards immediately to the Bio-medical (patient care equipment), IT (computer equipment) or Engineering Department (facility hazards) and complete a work order as soon as possible. Students should report to their preceptors.

Electrical Power Disruptions

Many patients rely on the ongoing support of electrical medical equipment. If the power fails, these patients could suffer severely. To provide uninterrupted electrical service, the facilities have back-up power generators to provide emergency electrical service. If a power failure occurs, all lighting and outlets marked in **red** will automatically switch over to emergency power.

In the event of a power failure:

- Stay in your area and reassure patients and visitors.
- Make sure critical equipment is plugged into **RED** emergency power outlets.
- Wait for further instructions from your director or Engineering Services.
- Do not use elevator

Chemicals

Hazardous chemicals and harmful materials are used in many areas. You have a right to know about these chemicals and materials.

Chemicals exist in one of three physical forms: solids (dust, powder, fibers, metal), gases and vapors (chemicals that are in gas form when at room temperature), and liquids (fluids and mists). Chemicals can enter your body through ingestion, inhalation, or absorption through your skin. The effect a chemical has on the body depends on several factors:

- The physical form of the chemical
- How the chemical enters the body
- The amount of chemical, or dose, which actually enters the body
- How toxic or poisonous the chemical

By practicing some basic safe work practices you protect yourself and reduce your risk.

Some key safety guidelines include:

- Know what ingredients are in the product you are working with.
- Use PPE as appropriate.
- Use the smallest amount of chemical possible to do the job

- Maintain machinery and equipment to prevent chemical leaks or releases.
- Use ventilation to reduce the amount of chemicals in the air.
- Tell your instructor/supervisor about any unusual odors or if you see a chemical spill or release.
- Leave the area if there is a large spill or chemical release.

Radiation Safety

If you work in areas that offer radiology services, you may be at risk for radiation exposure. To reduce the incidence of radiation injury or illness, you are responsible for taking steps to minimize your exposure by following the Occupational Safety & Health Administration (OSHA) radiation safety recommendations including:

- Avoiding areas where radiation is used if you're not working there. Departments using radiation will prominently post the "Caution Radiation Area" warning sign within their areas.
- Using Personal Protective Equipment (PPE) as required.
- Limiting your time around radiation sources.
- Maximizing your distance from radiation sources.
- Using appropriate shielding.
- Disposing of contaminated radioactive devices, linen, clothing, food trays and any other materials or waste properly.
- Avoiding radiation-related tasks if you are pregnant.

Radiation Spills

Radiation spills need to be reported immediately to ensure employee and patient safety. To report unsafe radiation conditions:

- Call Diagnostic Imaging and inform the Radiation Safety Officer. During this time, the patient's RN will continue to attend to the immediate needs of the patient until the Radiation Safety Officer coordinates the patient's evacuation.
- Evacuate the spill area of all visitors that have not been contaminated. If you suspect visitors may have been contaminated, do not allow them to leave until checked for contamination by clean-up personnel.
- Confine the spill by placing an absorbent material (towels, paper, linen) over the spilled material.
- Secure the area and prevent other personnel from entering the area and spreading contamination. Be sure not to step in or track the spilled materials.
- Complete an Event Report

Safety Data Sheets (SDS)

An SDS (Safety Data Sheet) is an information sheet that describes the hazards of chemical products. An SDS contains safety points about the chemical, including potential hazards, recommended personal protective equipment usage, first aid, and spill management procedures. SDS information is available through the CH Pulse Intranet site.

Emergencies

One of the first steps in responding to an emergency is activation the response system for your location. Although location specific emergency numbers are listed below, it is important for you to check with your supervisor for your department specific policies.

Emergency Number Overview:

- CWH&C Hospital Building: Dial 2911.
- CWH&C Outlying Buildings: Dial 9911.
- WVH&C Mares Building: Dial 70
- WVH&C Wenatchee Campus: Dial 9911, then dial 70
- WVH&C Moses Lake Clinic: Dial 26
- WVH&C Omak Clinic: Use overhead paging system and/or dial 9911
- All other locations dial 911 on the nearest phone

There are many types of emergencies that may occur in a healthcare facility. They are often referred to as “codes.” The following emergency codes are used at Confluence Health.

Code Blue: Medical Emergency

“Code Blue” is the emergency code used to announce a medical emergency and to activate the emergency response process. The Code Blue announcement will alert members of the Code Blue Team. Team members are trained to respond to emergency medical situations, bringing portable emergency equipment, medications, and advanced life support skills directly to the victim.

If you identify an individual with any of the following symptoms, immediately activate a Code Blue:

- No pulse
- Breathing trouble
- Loss of consciousness
- Slurred Speech
- Weakness or paralysis
- Suspected or visible serious injury
- Life-threatening dysrhythmia (irregular heart beat)

Steps:

1. In patient care rooms push the Code Blue button (when available)
2. Shout for immediate assistance
3. Dial the appropriate emergency number for your area on the nearest phone. Be sure to tell the operator you are calling a Code Blue and your location

Code Red: Fire

“Code Red” is the emergency code used to announce a fire and to activate the emergency response process. A fire in a healthcare facility is very serious. Smoke, heat, and structural damage can create health and safety issues for patients and employees. If a fire is not controlled quickly, it can spread rapidly, blocking escape routes and weakening structures to the point of collapse.

If you see or suspect a fire: RACE

R: Rescue

Immediately remove patients and/or any injured people from the fire area to safety

A: Activate

Activate the fire response system by dialing your location-specific emergency number

C: Confine & Contain

Confine/contain fire by closing doors

E: Extinguish

Extinguish the fire with a fire extinguisher if able

If present during a Code Red:

- Close all doors and windows
- Ask visitors to stay in patients’ rooms and/or behind closed doors
- Do not use elevators until directed
- If there is a need to evacuate, please follow directions of the emergency personnel

Code Orange: Chemical Spill

“Code Orange” is the emergency code used to communicate and activate a response in the event of a chemical or hazardous material spill or release that is likely to:

- Cause injury or illness
- Result in exposure that exceeds state or federal exposure limits
- Harm the environment

Some chemical or hazardous material spills or releases are minor and may be safely addressed without activating a Code Orange. Special assistance may not be necessary when:

- The spill is fairly small

- The material is known and is not highly toxic or flammable
- Safety Data Sheets (SDS) are available outlining the clean-up procedures for the material and clean-up is safe

In all other situations, a Code Orange should be activated in order to mobilize specially trained hazmat personnel. Code Orange situations include:

- Large spills or releases
- Unknown materials
- Materials known to be highly toxic or flammable
- Radioactive or chemotherapy spills

If you encounter a spill or release of hazardous materials that requires a code, take the following steps:

1. Activate “Code Orange” and state the location of the incident. A group of specially-trained staff including Engineering Services, Environmental Services, and Security will be alerted, and will report immediately to the scene. Depending on the nature of the spill, additional responders may also be alerted including the Radiation Safety Officer, a chemotherapy certified RN, or the House Supervisor (CWH).
2. If safe to do so, isolate the spill area.
3. Keep other employees, patients, guests, and visitors away from the spill and fumes.
4. Complete an electronic Event Report after the incident.

Code Gray: Combative Patient

A Code Gray is the emergency code used in the event of a potential or actual violence without a weapon. You should call a Code Gray when:

- There is an attempt of bodily harm to self or others
- There are verbal threats towards self or others
- You have a concern that a situation may become violent and need immediate help.
- If you feel threatened by a patient or a patient threatens to harm you

*At CWH, Code Gray focuses on violence or threats or violence specifically by patients. If anyone other than a patient becomes violent, contact 2911 for security and your supervisor immediately.

Activating a Code Gray

To activate a Code Gray:

1. Dial the emergency number for your location on the nearest phone. Announce “Code Gray” and your exact location to the operator as well as the specifics of the situation.
2. The operator will announce the Code Gray and the exact location on the overhead paging system (where available).

Responding to a Code Gray

CWH&C: The switchboard announcement will alert the Code Gray Team. At CWH clinics, please call the police.

WVH&C: Responding staff should be able-bodied persons who are available without compromising patient care. Their role is primarily to provide a show of force and become directly involved only if necessary.

Staying Safe Until the Code Gray Team Arrives

Once a Code Gray is announced, all available Code Gray Team members will arrive on the scene within minutes. While waiting for the team to arrive, however, the following practices may help keep you and others in the area safer:

- Stay calm. Avoid raising your voice, making accusations, and/or verbally challenging a potentially violent person. Leave the room or area if possible. If not, position yourself far enough from the person to avoid being struck or kicked.
- Do not let yourself get backed into a corner.
- Do not attempt to overpower or restrain someone by yourself. The best way to assist the Code Gray Team is to remain calm and professional, and to do as requested by the Code Gray Team Leader.

Code Silver: Violence with Weapon/Hostage Situation

The purpose of “Code Silver” is to communicate and activate a response during a life-threatening incident involving a person who displays hostile or violent behavior AND possesses a weapon OR is suspected of having a weapon and/or a hostage.

Activating a Code Silver has serious implications and can result in a partial or full Lock-Down of the facility. When the facility is in Lock down, no one is allowed in or out.

Activating a Code Silver

1. Dial your facility’s emergency number to alert the switchboard operator. State “Code Silver” and provide all pertinent information.
2. Call 9-911 to notify local law enforcement. Be prepared to stay on the line to provide additional specific information.
3. At the same time, the operator will:
 - Also report the incident to law enforcement.
 - Notify Security.
 - Announce “Code Silver” and the location three times overhead.
 - Notify the Administrator On-Call.
4. Security and/or Engineering will meet arriving local law enforcement with keys, maps and information regarding the building.

Responding to a Code Silver

- If a Code Silver is announced, respond as follows:
- Stay calm, remain in your area, and assure others that law enforcement is on the way.
- In nursing units, close patient doors and clear hallways of people.
- If able, move to a secure location
- Close and lock doors
- Close blinds
- Barricade the door (e.g. furniture, cabinets)
- Position yourself out of sight and behind items that may offer protection (e.g. desks, cabinets).
- Turn off all noise producing devices, such as cell phones or pagers. If you must keep a cell phone or pager on for patient care reasons, turn it to silent or vibrate mode.
- If safe, allow others to seek refuge with you, but, consider the risk exposure created by opening the door.
- Remain in the secured area until an “all clear” announcement is made or until instructed by law enforcement or organizational leadership

Amber Alert: Infant/Child Abduction

Amber Alert is the emergency code used when an infant or child is missing or is known to have been abducted. Infant and child abductors vary in their motives. They may be an estranged or angry parent, a child molester, or someone suffering from mental illness. While abductors have different motives, statistics identify some common characteristics including:

- May “hang around” high-risk areas (Obstetrics, Nursery, and Pediatric areas) with no apparent purpose
- May be seen peering into Pediatric, Post-Partum, and Obstetric patient rooms
- May try to become friendly with employees caring for hospitalized infants or children
- May appear “overly curious” about treatment or staffing schedules
- May be dressed in extremely baggy clothing which can be used to hide an infant

Reducing the Risk of Abductions

- Be vigilant of visitors who look or act suspicious, particularly in high-risk patient care areas
- Be aware of visitor restrictions. In some cases, a non-custodial parent or other family member may not be allowed to visit the patient
- Prevent unauthorized visitors from entering CH Mother/Baby and Pediatric inpatient units.
- Do not open department access doors for unauthorized visitors or allow visitors to follow you on or off the badge restricted patient transport elevators.

Activating an Amber Alert

If you see or suspect an infant or child abduction take the following steps:

1. Immediately activate the Amber Alert by calling the emergency number for your location. State the location and any known information to the operator.
2. Ask visitors to remain in patient rooms or other public areas
3. On patient care units, notify the Charge Nurse. The Charge Nurse will notify the manager, physician, and family.
4. Recheck the entire area for signs of the missing infant or child.

Responding to an Amber Alert

When an “Amber Alert” is announced, all available employees and volunteers will:

1. Go to the nearest exit door and delay anyone without security clearance from leaving.
2. Watch for person(s) approaching exit carrying a container large enough to hide an infant or escorting an infant or child.

Do not engage or attempt to physically restrain or search them.

Instead, you should:

1. Report exit immediately to security or your immediate supervisor.
2. Describe the suspect and the infant or child in as much detail as possible.

Any staff member should keep the possible abductee in sight and not engage them.

Code Black: Bomb Threat

“Internal Triage Code Black” is the emergency code used to announce a bomb threat and to activate the emergency response process. Activation of the Internal Triage Code Black process ensures that security measures are initiated as quickly as possible. The process is activated whenever a threat is received, whether verbally, in writing, or via telephone or email.

Telephone Bomb Threats

If you receive a telephone bomb threat, take the following steps to activate an Internal Triage Code Black:

1. Alert a second employee to call the emergency number while you’re still on the phone by writing - “bomb threat, call 2-911 OR 70 (or the appropriate number for your facility)” - on a piece of paper.
2. If possible, try to keep the caller on the line and get as much information as you can by:
 - Asking Questions:
 - a. When will it go off?
 - b. Where is it located?
 - c. What does it look like?
 - d. Why are you doing this?
 - e. Who are you?
 - f. Where are you?

- Listening Carefully:
 - a. Do you hear any background noise that might offer a clue to the caller's location?
 - b. Is it a female or male voice?
 - c. Does the voice have an accent or other distinguishing speech patterns?
- 3. Once the phone conversation is over and you've gotten as much information as possible, contact your supervisor to report any additional details.

Email or Written Bomb Threats

For Email Threats:

- Forward the bomb threat message to security (where available), your supervisor and Administration.
- Report the identity of the sender, the date and time the e-mail was received, who the message is intended for, who received copies, and the subject line from the e-mail message.
- Do not respond to the sender.
- Do not delete the bomb threat message.
- Print a copy of the bomb threat message, if possible.

For Written Threats:

- Read the bomb threat message to Security exactly as written.
- Avoid handing materials (bomb threat note, mailing envelope, etc.) more than necessary.
- Save materials and give them to security.

Responding to an Internal Triage Code Black

If you hear an Internal Triage Code Black announcement, take the following actions:

- Return to your regular department or work area. Walk, do not run.
- Search for unusual or suspicious objects throughout the department. Under no circumstances should you move or touch any suspicious objects.
- Report any unusual or suspicious objects to Security and your Supervisor
- Remain calm and reassure patients and visitors
- Remain on alert until you hear an "All Clear" announcement or notice from your supervisor
- Do not initiate department-specific evacuation plans unless directed to by an administrator.

External Triage

“External Triage” is called for an incident that occurs outside our facility and has the potential to impact normal operations.

External emergency incidents are events that occur outside the main campus. These incidents can vary widely, but usually create many casualties in the community. Some examples include:

1. High numbers of injured due to:
 - Fire or explosion
 - Motor vehicle accident
 - Plane or train accident
 - Earthquake
 - Flood
 - Chemical spills
2. High numbers of ill due to:
 - Flu
 - Food poisoning
 - Infectious or contagious disease

Evacuation Plan

The decision to evacuate the facility will be made by Administration. If you are instructed to evacuate:

- Follow your facility’s evacuation plan and instructions from your supervisor.
- Be familiar with your evacuation exit routes, evacuation processes, and evacuation equipment locations.

Preparing for Emergencies

A community-wide infrastructure is in place should an emergency incident occur within North Central Washington. Regional drills are performed to practice and improve emergency incident plans and response strategies. Your role in emergency incident preparations includes:

- Participating in drills as if they are real emergency incidents.
- Determining in advance how you will communicate with your family in the event that you are unable to leave the facility during an incident.



Organizational Development Department